

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts	File with: City or Town Clerk or Blection Commission
Fill in Reporting Period dates: Beginning Date: 5	-2-18 Ending Date: 6-8-18
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution
May 6. Ridice Candidale Full Name (if applicable)	Committee Name
Office Sought and District	Name of Committee Treasurer
3 CMUSTOPHUL CULCUL Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANO	CE INFORMATION:
Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11	748-22
Line 3: Subtotal (line 1 plus line 2)	-0-
Line 4: Total expenditures this period (page 5, lin	ne 14) 748.22
Line 5: Ending Balance (line 3 minus line 4)	-0-
Line 6: Total in-kind contributions this period (pa	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	
ffidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best civity, including all contributions, loans, receipts, expenditures, disbursements, in-kind on nance activity of all persons acting under the authority or on behalf of this committee in igned under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	x only)
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period.
Candidate without Committee OR Candidate with independent activity filing set I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	committee in accordance with the requirements of M.G.L. c. 55.
gned under the penalties of perjury:	Candidate's signature) Date: 6/18/18

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Name and Residential Address		Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
5/14	Many G. Rooke. 3 Churistophen Cul	748.22	Sief.
	·		·
Line 9: Total Recei	pts over \$50 (or listed above)	74822	,
Line 10: Total Recei	ipts \$50 and under* (not listed above)		·
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	748.22	← Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

our committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)					
To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
WataPeint	Hudsmireg 8 Vento Netherlands	Postcardo	151.10		
ILS	193 Norman St West Speld MA	mailing	47652		
USPS.	Boston Road Wilbpaham, MA	Postage.	*3500		
U5P5	Byston Road Willbraham, MA	Postage	4560		
Healy's Trish	Cheopel, M. J. 1030	Radio Ads	48000		
		·			
			·		
Line 12: Total Expenditures over \$50 (or listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD 148 250 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	To Whom Paid (alphabetical listing) What a Plant I has USPS Wasps Healy a Trush Howk	To Whom Paid (alphabetical listing) What Plant Huclewisel 3 Vendo Retherlands I As Roman St West Settle Met USPS Brotm Poach Wilbraham, Met USPS Brotm Poach Wilbraham, Met Healy's Trush 103 Flumble St Churple, Metoso Whom Paid (alphabetical listing) Whom Paid (alphabetical listing) Whom Retherlands Wilbraham, Metoso Wilbraham, Wilbraham, Me	To Whom Paid (alphabetical listing) Watarbunt Vuolonmarela 8 Venlo Netherlands Postcards I has last Settlament Mailing USPS Bookin Road Wilbraham, Met Postage. Wash Semales Maling Waly's Trush 103 Fundel St Churpus, mithods Waly's Trush Churpus, mithods Radio Ads I have a last semales of the semal		

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.